Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

									11/11			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			24				-	RATE	FEE	1	RATE	FEE
FOR			NUMBER	*****	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	24 mir	nus 20=	* 4			X\$ 9=		OR	X\$18=	72
INE	EPENDENT C	LAIMS	minus 3 = * /					X43=		OR	X86=	86
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	- 50
* If	the difference	in column 1 is	less than ze	n zero, enter "0" in column 2				TOTAL		OR	TOTAL	928
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	(Column 2			(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		1	TOTAL	
			F	ADDIT. FEE		OR	ADDIT. FEE					
)	(Column 1)										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
		L	TOTAL			TOTAL						
ADDIT. FEE												
		(Column 1) CLAIMS		(Colum		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT	,	HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	21	=		X43=		OR	X86=	
`	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	TIPLE DEPENDENT C			 -					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** [f the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE is	less that	n 20, enter "20."	A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		mber Previously Pa ber Previously Paid					r four	nd in the app	ropriate box	in col	umn 1.	